Board of Commissioners Grant Fact Sheet

Committee Name: Public Works Date of Committee: 09/07/2016

| 1. Grant Name: | Congestion Management Program – Signal System Set #16 | |
|------------------------------|--|--|
| 2. Grantor: | Tennessee Department of Transportation | |
| 3. Submitted by: | Darren Sanders, Administrator / Roads, Bridges & Engineering | |
| 4. Amount: | \$1,898,375.00 | |
| 5. Funding Period: | 550 days from construction contract execution | |
| 6. Deadline: (if applicable) | June 30, 2017 | |
| 7. Target Population: | 900,000 | |
| 8. Grant Funding: | New Single Year Continuation Multi-Year Renewable | |

| 9. What are the specific goals of the grant? (The final grant proposal should include the goals and the measurable objectives.) | Signal retiming; traffic signal coordination; and upgrading video detection and emergency vehicle preemption throughout Shelby County |
|--|--|
| 10. How will the project be evaluated to determine that the goals are being met? | Inspection and testing |
| 11. What bench marks will be utilized to determine that the goals are being met? | Engineering Design and Construction Specifications |
| 12. Who will conduct the evaluation? | Robert Evans, Senior Engineer Assisted by Engineering Consultant |
| 13. What will happen to the program after it ends? | Grant Program will continue to provide funding for projects that have been approved through the Metropolitan Planning Organization (MPO). |
| 14. List the partners (faith-based, business community, foundations, etc.) that will be sub-recipients of grants funds. | None |
| 15. If this is a continuation of previous grant funding and sub-recipients have been awarded funds in the past, list accomplishments/benchmarks met with | N/A |

Board of Commissioners Grant Fact Sheet

Committee Name: Public Works Date of Committee: 09/07/2016

| 16. What are the criteria for selecting partners? (if applicable) | N/A |
|---|---|
| 17. What type of reporting is required? | Quarterly Annual Other |
| 18. Will Shelby County Government be the fiscal agent? | Yes No If no, who will serve as the fiscal agent? |
| 19. What budget categories will be included? (Check all that apply) | Personnel Fringe Benefits Equipment Books Supplies Indirect Costs Resources Construction Sub-grants Travel Professional Development Others (list) |
| 20. What new personnel will be hired? (if applicable) | None |
| 21. If equipment purchases will exceed \$50,000 or 25% of the total grant funding, list the type of equipment specified in the grant application. | None |
| 22. How much money is allocated for evaluation? | \$275,000 |
| 23. Does the grant require a match? | Yes No If yes, designate the source of the match. |
| 24. Who will provide accounting for the grant? | Shelby County Finance and Public Works Engineering |

Board of Commissioners Grant Fact Sheet

| Committee Name: Public Works | Date of Committee: 09/07/2016 | | | |
|--|-------------------------------|--|--|--|
| | | | | |
| 25. Does the grant require the signature of the Mayor and/or County Commission Chairman? | ☐ Yes ☐ No | | | |
| 26. INTERNAL VERIFICATION | | | | |
| To be verified by the Shelby County Board of Commissioners prior to grant acceptance. | | | | |
| | | | | |